

CLAIMS ONLY
BEST AVAILABLE COPY

Application Number

Filing Date

10/507.081

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1		1			
2		1		1		
3	1		1			
4		1		1		
5	1		1			
6		1		1		
7		1		1		
8	1		1			
9		1		1		
10		1		1		
11	1		1			
12		1		1		
13		1		1		
14	1		1			
15		1		1		
16		1		1		
17	1		1			
18		1		1		
19		1		1		
20	1		1			
21		20		20		
22		20				
23		20				
24		20				
25		20				
26		20				
27		20				
28		20				
29		20				
30		20				
31		20				
32		20				
33				1		
34				1		
35				1		
36				1		
37				1		
38				1		
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	8		8			
Total Depend			38			
Total Claims			48			